



STANDING ORDER MANDATE

Please take this form to your bank for processing

| | |
|--|--------------------------|
| TO: LLOYDS BANK | Branch |
| PLEASE TICK RELEVANT BOX: | <input type="checkbox"/> |
| PLEASE AMEND PREVIOUS STANDING ORDER QUOTING REFERENCE / BENEFICIARY | <input type="checkbox"/> |

ACCOUNT TO BE DEBITED:

SORT CODE:

ACCOUNT NO:

ACCOUNT NAME:

BENEFICIARY DETAILS:

BANK: LLOYDS BANK PLC Victoria, London

BRANCH DETAILS: Lloyds Bank PLC, PO Box 1000, BX1 1LT

SORT CODE: 30-98-97

ACCOUNT No: 47181963

BENEFICIARY NAME:

The 100th Bomb Group Memorial Museum

REFERENCE:

Membership

PAYMENT DETAILS

| | | | | | |
|-------------------------|--|-----------------------|--|-------------------------|--|
| AMOUNT OF FIRST PAYMENT | | DATE OF FIRST PAYMENT | | AMOUNT OF USUAL PAYMENT | |
|-------------------------|--|-----------------------|--|-------------------------|--|

AMOUNT OF USUAL PAYMENT IN WORDS:

| | | | | | |
|---|--|------------------------|--|---|--|
| WHEN PAID: Weekly Monthly Annually etc | | DATE OF USUAL PAYMENT: | | COMPLETE EITHER AMOUNT OF LAST PAYMENT: | |
|---|--|------------------------|--|---|--|

| | | | | | |
|---------------------------|--|--|--|-----|--|
| AND DATE OF LAST PAYMENT: | | OR PLEASE CONTINUE PAYMENTS UNTIL FURTHER NOTICE | | YES | |
|---------------------------|--|--|--|-----|--|

CUSTOMER SIGNATURE(S):

DATE:

CUSTOMER TELEPHONE NUMBER: